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Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

☒ Declaration Submitted with Initial Filing ☐ Declaration Submitted after Initial Filing

Attorney Docket Number

First Named Inventor

GREGORY E. JOHNSTON

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

AN APPARATUS AND PROCESS FOR CAPTURING IMAGES BY MOBILE SECURITY GUARDS.

(Title of the Invention)

the specification of which

☒ is attached hereto
OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or §365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
NONE			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
NONE		

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PTO/SB/01 (8-96)

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DECLARATION

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
NONE			

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:


Name	Registration Number	Name	Registration Number
NONE			

☐ Additional registered practitioner(s) named on a supplemental sheet attached hereto.

Direct all correspondence to:

Name	GREGORY E. JOHNSTON		
Address	1528 MONTEVAL PLACE		
Address			
City	SAN JOSE	State	CA
		ZIP	95120
Country	USA	Telephone	408.997.8969
		Fax	408.997.9521

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	GREGORY	Middle Initial	E.
Family Name	JOHNSTON	Suffix e.g. Jr.	
Inventor's Signature			Date
			06 APR 98
Residence: City	SAN JOSE	State	CA
		Country	USA
Citizenship	USA		
Post Office Address	1528 MONTEVAL PLACE		
Post Office Address			
City	SAN JOSE	State	CA
		Zip	95120
		Country	USA

☐ Additional inventors are being named on supplemental sheet(s) attached hereto

Please type a plus sign (+) inside the box → ☐

PTO/SB/01 (8-86)

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor											
Given Name		ARIE				Middle Initial				Family Name		LEVINKRON				Suffix e.g. Jr.					
Inventor's Signature		<i>U/m</i>								Date		April 1, 1998									
Residence: City		WEST HILLS				State		CA		Country		USA				Citizenship		USA			
Post Office Address		7320 CIRRUS WAY																			
Post Office Address																					
City		WEST HILLS				State		CA		Zip		91307				Country		USA			
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor											
Given Name						Middle Initial				Family Name						Suffix e.g. Jr.					
Inventor's Signature										Date											
Residence: City						State				Country						Citizenship					
Post Office Address																					
Post Office Address																					
City						State				Zip						Country					
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor											
Given Name						Middle Initial				Family Name						Suffix e.g. Jr.					
Inventor's Signature										Date											
Residence: City						State				Country						Citizenship					
Post Office Address																					
Post Office Address																					
City						State				Zip						Country					
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor											
Given Name						Middle Initial				Family Name						Suffix e.g. Jr.					
Inventor's Signature										Date											
Residence: City						State				Country						Citizenship					
Post Office Address																					
Post Office Address																					
City						State				Zip						Country					
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor											
Given Name						Middle Initial				Family Name						Suffix e.g. Jr.					
Inventor's Signature										Date											
Residence: City						State				Country						Citizenship					
Post Office Address																					
Post Office Address																					
City						State				Zip						Country					

☐ Additional inventors are being named on supplemental sheet(s) attached hereto

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DECLARATION

PRIORITY DATA (Supplemental Sheet)

Additional foreign applications:

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
NONE			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional provisional applications:

Application Number	Filing Date (MM/DD/YYYY)
NONE	

Additional U.S. applications:

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
NONE			



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**REGISTERED PRACTITIONER
INFORMATION
(Supplemental Sheet)**

Name	Registration Number	Name	Registration Number
NONE			

**VERIFIED STATEMENT CLAIMING SMALL ENTITY STATUS
(37 CFR 1.9(f) & 1.27(b))—INDEPENDENT INVENTOR**

Docket Number (Optional)

Applicant or Patentee: GREGORY E. JOHNSTON

Application or Patent No.: _____

Filed or Issued: _____

Title: AN APPARATUS AND PROCESS FOR CAPTURING IMAGES BY MOBILE PATROL GUARDS

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees to the Patent and Trademark Office described in:

- ☒ the specification filed herewith with title as listed above.
☐ the application identified above.
☐ the patent identified above.

I have not assigned, granted, conveyed, or licensed, and am under no obligation under contract or law to assign, grant, convey, or license, any rights in the invention to any person who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern, or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- ☒ No such person, concern, or organization exists.
☐ Each such person, concern, or organization is listed below.

Separate verified statements are required from each named person, concern, or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

GREGORY E. JOHNSTON
NAME OF INVENTOR

[Signature]
Signature of inventor

06 APR 98
Date

ARIE LEVINKRON
NAME OF INVENTOR

[Signature]
Signature of inventor

April 7, 1998
Date

NAME OF INVENTOR

Signature of inventor

Date

09059077-040998